



King County Sheriff's Office

Children and Domestic Violence Response Training

2005

Training Project Developed in Partnership with:

- **King County Office of the Prosecuting Attorney**
- **King County Sheriff's Office**
- **Public Health – Seattle & King County**
- **Washington State Department of Social and Health Services, Division of Children and Family Services, Region Four**

Training Overview

- **Impact of Domestic Violence on Children**
- **Children and DV Pocket Guide**
- **Assessing Children at the Scene**
- **KCSO Documentation**
- **Child Protective Services Reporting**

Children/Youth & Domestic Violence

Effects of DV on Children/Youth

- **Emotional**
- **Cognitive**
- **Behavioral**
- **Social**
- **Physical**

Emotional

They may feel:

- **Guilty or responsible that they could not stop the abuse**
- **Conflicted feelings toward both parents**
- **Scared or fearful**
- **Angry**
- **Depressed or Anxious**
- **Embarrassed**
- **Grief from loss of objects or injury to parent**

Cognitive

They may think:

- That they are responsible for the violence
- That it is acceptable to hit people to get what they want

They may have negative or rigid perceptions:

- Have difficulty developing trust
- May think poorly of themselves or have low self esteem
- Have black and white thinking
- Have rigid beliefs on male/female roles

Behavioral

They may show changes in their behavior:

- **Acting out or withdrawing**
- **Be an over achiever or under achiever**
- **Unable to set limits**
- **Aggressive**
- **Engage in high risk play and activities**
- **Inflict self abuse**
- **Frequently misdiagnosed with ADHD**

Social

They often have difficulties with social relationships.

They may:

- **Be isolated from friends**
- **Have stormy relationships that can start intensely and end abruptly**
- **Have poor conflict resolution and coping skills**
- **May bully peers**

Physical Patterns

Children who witness many violent incidents or observe significant injuries to their parent may develop physical problems such as:

- **Headaches**
- **Stomachaches**
- **Eating problems**
- **Sleeping problems**
- **Have poor personal hygiene**

DV Effects Vary with Age

- Infants/Preschool Children
- May be easily over stimulated by noise and abrupt movements
- May have increased crying and irritability
- May be clinging onto victim or be very distressed when separated from victim
- May have slowed development
- School Aged Children
- May have difficulty paying attention in school, have poor school performance, or frequent school absences
- May be very worried about victim safety or perpetrator going to jail
- May physically attempt to stop the DV

DV Effects Vary with Age

Adolescents

- May use drugs/alcohol to cope with their feelings
- May have greater risk of having DV in their dating relationships
- May have increased conflict and aggression with their caregivers
- May attempt to intervene in DV incidents



KCSO Children and Domestic Violence Response Pocket Guide

CSO Child/DV Pocket Guide Overview

- **Locate children**
- **Check on child well being and condition**
- **Provide reassurance and support**
- **Talk to child**
- **Assess for “risks”**
- **Identify next steps**
- **Offer resources**
- **Complete documentation**
- **Determine need for CPS involvement**

Upon Arrival at DV Scene:

- **Ask are there children living in the home?**
- **If yes, where are the children? Are they hiding under beds, in closets, or the attic?**
- **Identify any child present (name/age/sex)**
- **Where were the children during the DV incident? How close were the children? Were they in the same room, upstairs or downstairs?**
- **Did the children see/hear what happened?**

Check on Child's Well Being and Physical Condition

- **Note the child's emotional state and demeanor. Is the child upset, distraught, crying, or withdrawn?**
- **Does the child appear afraid? Of whom?**
- **Is the child worried about his/her safety? Mother's safety? Father's safety?**
- **Determine if the child is injured.**

Identify Yourself and Your Role:

- **Remember that offenders often give children misinformation about police officers.**
- **The child may have misconceptions about your presence.**
- **Explain to the child why you are there:
“I am here to keep everyone safe.” “I
am here to make the violence stop.”**

Talk to the Child in a Safe Place

- **Make sure that you talk with the child in a place that is out of the sight and sound of the offender, victim, and siblings.**
- **Whenever possible, take the child to a place where they would be the most comfortable talking with you.**

Reassure the Child and Tell Them Why You are There:

Explain to the child that:

- You realize they may be upset
- You want to help
- What happened is not their fault
- You are concerned about them
- You do not want to see anyone get hurt

Important Points for Speaking to Children at DV Scenes:

- **Always acknowledge the child's right not to speak if they are not able to.**
- **Get eye level with the child. Get down on your knees or sit to face the child.**
- **It is important not to “take sides”, criticize or demean the abusive parent. The child may feel loyalty to the abusive parent.**

Talk to the Child

- Use the Child's name
- Explain that you were not there, and you need help to understand what happened
- Ask child about their family, school, pets, interests, and activities
- Use simple words
- Use short sentences
- Ask one question at a time
- Avoid rushing the child
- Avoid leading questions
- Avoid asking “why” questions as they can imply blame

Questions for Child:

Suggested questions to ask:

- Tell me what happened?
- What did you see?
- What did you hear?
- Where were you when this happened?
- How were you feeling?
- Are you hurt?
- Follow up yes/no responses with: “Tell me more about that.”

Children at DV Scenes

- **The statements children make to police officers at the scene may be admissible without having the children testify in court.**
- **Noting the child's demeanor is critical in order to document their mental or physical condition.**
- **The presence of child during DV incident may be an aggravating factor supporting an exceptional sentence. RCW 9.94A.535(2)(h)(ii)**

Children at DV Scenes - Photographs

- **A photograph can be worth a thousand words**
- **Photographs capture a child's presence at a DV scene**
- **Photographs can show how a child is affected by the DV incident**



KCSO Documentation

DOMESTIC VIOLENCE SUPPLEMENTAL FORM

A-143

Revised 04/03

DV Supplemental Children Information

- **Children Present During Incident:**
☐ Yes ☐ No ☐ Unknown
If Yes, complete information on children
- **Child Victim Assaulted/Injured During Incident:**
☐ Yes ☐ No ☐ Unknown
If Yes, give full detail in narrative.
- **Statements Taken from Children:**
☐ Yes ☐ No ☐ Unknown
If Yes, document in narrative.

DV Supplemental Children Information

Child Name	Sex	Date of Birth	Location During DV Incident	Observation of Child's Demeanor

CPS Referral Guidelines for Child DV Cases

Call CPS Immediately to Triage Child Safety Needs

To contact CPS:

- **During Daytime Hours call King County Intake: 1-800-609-8764**
- **During Evening/Weekend/Holiday Hours call Statewide Intake: 1-800-562-5624**
- **For Police Only: Press 9 to be connected to the next available intake worker**

DV Fatality Review

Lethality Indicators

With DV fatality cases, a pattern of risk factors can be present including:

- Threat of suicide by the offender**
- Threat to kill others**
- Use of guns or weapons**
- Untreated Mental Health or Chemical Dependency Problem with offender**

For more information See the 2004 Washington State Coalition Against DV, Fatality Review Report at www.wscadv.org.

Call CPS Immediately to Triage Child Safety Needs

- **Perpetrator displays pattern of lethality indicators**
- **Child/youth is assaulted or injured during DV**
- **Perpetrator violates child/youth's NCO and/or protection order**
- **Use of lethal weapon in child's presence**
- **Child/youth expresses fear perpetrator will kill or injure someone in the home**
- **Perpetrator commits severe violence and threatens to kill child/youth**
- **Caregivers cannot safely care for child/youth and KCSO places child into protective custody**

Make CPS Referral Within 24 hours

- **Perpetrator interference with child/youth's attempts to report DV**
- **Perpetrator throws object that could hit and injure child (reckless endangerment)**
- **Child in physical jeopardy (child gets caught in cross fire or infant is being held by mother during the assault)**
- **Perpetrator forces/coerces child/youth to participate in violent acts**
- **Perpetrator displays firearm or lethal weapon in child/youth's presence**
- **DV patterns escalating in severity or frequency in last 90 days**

Make CPS Referral Within 24 hours

- **Child/youth is witnessing or forced to participate with the perpetrator's killing or torturing of family pets.**
- **Child experiences changes in their patterns from exposures to DV incidents. For example, child having chronic sleep deprivation, increased aggressive behaviors, or has persistent anxiety and/or depression.**
- **Perpetrator interferes with the provision of child's minimal needs of food, shelter, safety or supervision.**

Consider CPS Referral

- **Anytime a child is at risk of harm**
- **Contact supervisor if unclear about CPS reporting**
- **When in doubt, call CPS Intake to determine if a referral is appropriate. You may also FAX or mail a copy of the KCSO report to CPS.**